

**Nursing and Midwifery Council
Fitness to Practise Committee**

**Substantive Hearing
Tuesday, 3 June – Wednesday, 11 June 2025**

Nursing and Midwifery Council
2 Stratford Place, Montfichet Road, London, E20 1EJ

Thursday, 12 February – Friday, 13 February 2026
Virtual Hearing

Name of Registrant:	Jophil George
NMC PIN:	19I0594O
Part(s) of the register:	Registered Nurse – Sub Part 1 Adult Nursing – 23 September 2019
Relevant Location:	Derbyshire
Type of case:	Misconduct
Panel members:	Mandy Rayani (Chair, Registrant Member) Tiago Da Silva (Registrant Member) Jan Bilton (Lay Member)
Legal Assessor:	Simon Walsh (3 - 11 June 2025) Suzanne Palmer (12 - 13 February 2026)
Hearings Coordinator:	Angela Nkansa-Dwamena (3 - 11 June 2025) Ekaette Uwa (12 - 13 February 2026)
Nursing and Midwifery Council:	Represented by Selena Jones (3 - 11 June 2025) David Claydon (12 - 13 February 2026), Case Presenters
Mr George:	Present and represented by Rosalia Myttas-Perris, instructed by the Royal College of Nursing (RCN)
Facts proved:	Charges 1a, 1b, 1d(i), 1d(ii) 2, 3a, 3b, 3c and 4 (with respect to Charges 1a, 1b, 1d(i), 1d(ii)).
Facts not proved:	Charges 1c and 4 (with respect to Charges 2, 3a, 3b and 3c)

Fitness to practise:

Impaired

Sanction:

**Suspension order with review
(6 months)**

Interim order:

Interim suspension order (18 months)

Details of charge

That you, a registered nurse:

1. On or around December 2022:
 - a. hugged Colleague A
 - b. put your hand inside Colleague A's t-shirt
 - c. on more than one occasions asked Colleague A for a kiss
 - d. whilst in the training room:
 - i. kissed Colleague A
 - ii. grabbed Colleague A's breasts
2. On 29 December 2022 kissed Colleague A.
3. On 9 November 2023:
 - a. told Colleague A that she "was looking very beautiful" or words to that effect
 - b. tried to hug Colleague A
 - c. asked Colleague A for a kiss
4. Your conduct at 1 – 3 inclusive was sexually motivated in that you were seeking sexual gratification.

AND in light of the above, your fitness to practise is impaired by reason of your misconduct.

Background

On 9 November 2023, the Nursing and Midwifery Council (NMC), received a referral from Colleague A, raising concerns about your conduct towards her. The charges arose whilst you were working as a registered nurse at Morton Grange Nursing Home ('the Home').

Colleague A informed the NMC that she had started working at the Home on 9 December 2022, following her recent arrival from India. She stated that initially you had a friendly, but professional relationship as you were both from Kerala, India. She alleged that shortly after starting at the Home, you had tried to sexually harass her on three occasions. She further alleged that you uninvitedly hugged her, attempted to kiss her, and placed your hands in her T-shirt and grabbed her breasts. Colleague A reported that your behaviour was ongoing despite asking you to stop.

The Home conducted an internal investigation and issued you with a warning.

Decision and reasons to implement special measures for Colleague A

At the outset of the hearing, the panel enquired about what measures were in place to support Colleague A, a vulnerable witness who has alleged sexual assault against you. The panel considered that since this is a hybrid hearing, in which you and Colleague A will both appear on the screen, it would be appropriate to have special measures in place to enable Colleague A to give her best evidence.

Ms Jones, on behalf of the NMC, informed the panel that a decision had been made earlier, during the investigation of this case, that special measures did not need to be put in place for Colleague A. In light of this, there are currently no special measures in place.

The panel heard and accepted the advice of the legal assessor who referred to Rule 23 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules), which governs the provision for vulnerable witnesses. He stated that Rule 23(1)(e) indicates that any witness, where the allegation against the registrant is of a sexual nature and the witness was the alleged victim, may be treated as a vulnerable witness.

The panel was satisfied that under Rule 23, Colleague A should be treated as a vulnerable witness. Given the nature and seriousness of the allegations in this case,

the panel determined that the following measures should be put in place to assist Colleague A to give her evidence before the panel:

- Your camera should be turned off during Colleague A's evidence.
- The entirety of Colleague A's evidence should be heard in private under Rule 23.

Decisions and reasons on application to admit screenshot image into evidence

Prior to Colleague A's evidence, Ms Myttas-Perris, on your behalf, made an application to admit a screenshot of a Facebook friend request allegedly sent by Colleague A's husband to your wife.

Ms Myttas-Perris submitted that in her witness statement, Colleague A had stated that she had called her husband and told him about your alleged actions. She submitted that this friend request was sent in the intervening period between the alleged incidents and provides a point of background and context that the panel should be aware of.

Ms Myttas-Perris submitted that this friend request was either a legitimate friend request, sent in a friendly manner or it was sent in more sinister circumstances, therefore, she would like to ask Colleague A about whether she was aware of this contact and why it was sent. She submitted that this evidence is not hearsay evidence as your wife can be called to give evidence with respect to this.

Ms Jones opposed this application. She said that the document submitted is undated and its origin is disputed. She pointed out that there is no URL or web address, and it is not accepted by the NMC that this document was sent by Colleague A's husband.

Ms Jones submitted that the NMC has not had the opportunity to conduct its own investigation in relation to this or obtain a witness statement from the person who you report is Colleague A's husband. She submitted that this document was only

produced this afternoon, and it is clearly hearsay evidence purporting to be an attempt to contact your wife by Colleague A's husband.

Ms Jones submitted that the admission of this evidence would be unfair, and it does not appear that it will assist the panel to determine any of the key issues in this case as outlined in the charges.

The panel accepted the advice of the legal assessor.

The panel considered that the screenshot provided was not evidence that contact had been made with your wife by Colleague A's husband. The panel noted that it was not dated, and it was vague; it cannot be said with certainty who sent the friend request and who it was received by. The panel determined that this evidence was not relevant and that it would not be fair to admit it into evidence.

Decision and reasons on application for hearing to be held in private

During the course of your evidence at the facts stage, you told the panel about matters pertaining to your health. Ms Myttas-Perris made an application on your behalf, for the parts of your evidence referring to your health to be heard in private. This application was made pursuant to Rule 19 of the Rules.

Ms Jones raised the issue of whether matters pertaining to your health were relevant to the allegations in this case. However, she indicated that she supported the application in that matters pertaining to your health should be heard in private.

There were no observers in this hearing at this time.

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

The panel determined to hold the hearing partly in private when matters pertaining to your health are raised.

Decision and reasons on facts

In reaching its decisions on the disputed facts, the panel took into account all the oral and documentary evidence in this case together with the submissions made by Ms Jones, on behalf of the NMC and by Ms Myttas-Perris, on your behalf.

The panel was aware that the burden of proof rests on the NMC, and that the standard of proof is the civil standard, namely the balance of probabilities. This means that a fact will be proved if a panel is satisfied that it is more likely than not that the incident occurred as alleged.

The panel heard evidence from the following witnesses called on behalf of the NMC:

- Witness 1: Colleague A and Senior Care Assistant at the Home, at the time of the incidents.

- Witness 2: Administration Manager at the Home, at the time of the incidents.

The panel heard evidence from you under oath.

The panel also heard evidence from the following witnesses called on your behalf:

- Witness 3: Registered Nurse at the Home, at the time of the incidents.

- Witness 4: Your wife and Senior Care Assistant at the Home, at the time of the incidents.

- Witness 5: Senior Care Assistant at the Home, at the time of the incidents.

- Witness 6: Senior Nurse and your Line Manager at the Home, at the time of the incidents.

- Witness 7: Registered Nurse and previously a Senior Care Assistant at the Home, at the time of the incidents.

- Witness 8: Registered Nurse and previously a Senior Care Assistant at the Home, at the time of the incidents.

Before making any findings on the facts, the panel heard and accepted the advice of the legal assessor who referred to the cases of *Re B (Children)* [2008] UKHL 35, *Hosny v GMC* [2011] EWHC 1355 (Admin), *Braganza v BP Shipping* [2015] UKSC 17, *El Karout (No 1) v NMC* [2019] EWHC 28, *Suddock v NMC* [2015] EWHC 3612 (Admin), *Professional Standards Authority for Health and Social Care v (1) HCPC and (2) Leonard Ren-Yi Yong* [2021] EWHC 52 and section 78 of the Sexual Offences Act 2003.

The panel considered the witness and documentary evidence provided by both the NMC and you.

The panel then considered the disputed charges and made the following findings.

At the outset of its deliberations, the panel noted that Colleague A's statement and the charges were poorly drafted and there were inconsistencies in the chronology they presented. The panel therefore decided to consider the incidents chronologically in a timeline, as outlined below:

29 December 2022

Colleague A told the panel that an incident occurred the day after her journey with you to a local ATM and to McDonald's on 28 December 2022. Colleague A did not allege that anything untoward had happened, other than that the journey seemed to take longer than expected. The panel acknowledged that Colleague A may have perceived the journey to have been longer than it was as she was unfamiliar with the area and the journey took place at night. The panel did not consider that this undermined her credibility in respect of her specific allegations on later dates.

Colleague A said:

'On December 28th, shortly after I finished working at nursing home, Mr George took me to find an ATM...The next morning, after 9:30 a.m., he picked me up from the nursing home.'

The panel was satisfied that an incident happened on 29 December 2022.

Colleague A told the panel that she had wanted to go to Chesterfield on that day to open a UK bank account. She said that you had offered to take her there, and it was during this journey that you had kissed her. Her oral evidence was consistent with her account in her witness statement:

'...I needed to go to the HSBC bank for a new salary account. He offered to show me the bus stop to get to Chesterfield... he said he would help me by taking me there... The next morning, after 9:30 a.m., he picked me up from

the nursing home. However, once I got into Mr George's car, he drove me to Mansfield, which was a very long distance from the nursing home and a different route. The journey took about 45 minutes to an hour. When we were in the car Mr George suddenly kissed me. I felt in fear and scared. After Mr. George dropped me off at the bus stop, I called my husband and told him what had happened.'

You agreed that on a day after the visit to the ATM, you had driven Colleague A to Mansfield Bus Station, where you dropped her off. However, you stated that nothing had happened in the car and denied kissing Colleague A.

The panel accepted Colleague A's account. The panel noted that Colleague A had not mentioned this incident in her later accounts, namely her response to questions asked by the NMC in an email dated 20 November 2023 or in her local investigation meeting on 14 November 2023. However, Colleague A had described that the incident had made her feel scared and in fear, and that she had called her husband straight after.

The panel considered that the fact that Colleague A felt compelled to call her husband after this incident, was a reasonable response to something untoward having happened during the time she was in your car. The panel was satisfied that Colleague A's evidence was consistent and that she was a credible witness. The panel was of the view that if nothing had happened, as you had said, then it would be unlikely that Colleague A would have felt the need to contact somebody. The panel determined that it was more likely than not, that you had kissed her as she had described.

December 2022 – The Training Room

The panel noted that at all material times, the training room in the Home was in fact being used by Colleague A as her temporary personal accommodation. The room contained a bed and all of her personal belongings.

Colleague A's evidence about the training room incident was muddled in her description of when things happened. She was however clearer about what happened. In her witness statement, Colleague A stated:

'After the ATM incident, I can't recall the date however it was in early December, I was alone in the training room and Mr George came into the room and hugged me. I pushed him away however he hugged me tighter and I told him to leave me alone.'

However, later on in the same witness statement, Colleague A went on to describe what appeared, on first reading, to be another incident:

'Again on another day, he was on duty and came to the training room (which the nursing home gave for me for temporary accommodation) when I was alone...'

The panel noted that although Colleague A's witness statement could be read to suggest that there were two separate incidents in the training room, the fact that the events she had described in different paragraphs had such striking similarities made it more likely than not that she was describing the same incident in a badly drafted statement. During her oral evidence, Colleague A described only one incident. This was not challenged by either Ms Jones or Ms Myttas-Perris. In light of this, the panel was satisfied that only one incident had taken place in the room that was being used as Colleague A's private accommodation.

The panel also noted that Colleague A had stated that this incident had occurred in early December. However, in the very same sentence, she had also said that the incident had taken place after the journey to the ATM on 28 December 2022. Given this, the panel was satisfied that this incident would have taken place later on in the month between 29 and 31 December 2022.

Colleague A said:

'After the ATM incident, I can't recall the date however it was in early December, I was alone in the training room and Mr George came into the room and hugged me.'

I pushed him away however he hugged me tighter and I told him to leave me alone [...] Mr George did not let go and he was laughing and smiling, and he didn't take me seriously when I asked him to stop. He then put his hand inside my T Shirt and groped me. I pushed him back hard and told him to go out of the room and he then left the room [...]

I was crying and scared. I didn't know if I should report him because I had only just started and I was worried that Mr George who was a nurse, would take it out on me, so I called my husband [...]

Again on another day, he was on duty and came to the training room (which the nursing home gave for me for temporary accommodation) when I was alone. Suddenly he forcefully held me and kissed me. I begged him to don't do anything to me, and to go out. However Mr George put his hands in my T-shirt, forcefully lifted and grabbed my private parts (breasts) [...]

In your oral evidence, you said that Colleague A had asked you to return her ATM card as she had left it in your possession following the trip on 28 December 2022. You said that after your shift, you went home, collected the card and returned to the Home. You further stated that you had gone to Colleague A's room with Witness 5 to return the card and you said that you had stood on the staircase talking to another individual about cars, as they also had a keen interest in this topic.

However, your account was contradicted by the comments you made during your disciplinary meeting with Witness 2 and Ms 1 on 30 November 2023. You stated:

'JG: I went to her room to give her card back to her that she had given to me. She was upset and I tapped her shoulder (Jophil gestured a shoulder tap).

[Ms 1]: Did you hug her?

JG: No just (Jophil gestured a shoulder tap).'

In your oral evidence, you denied hugging, attempting to hug, kissing or touching Colleague A's breasts.

You told the panel that you were on the staircase. The panel found it difficult to understand how if you were on the staircase, you would have been able to tap Colleague A on the shoulder, unless she came out of her room. You told the panel that Witness 5 had accompanied you to Colleague A's room. She would therefore have seen Colleague A come out of her room and should have been able to corroborate this account. You called Witness 5, but she did not corroborate this account.

The panel accepted Colleague A's account. Your account was inconsistent and contradictory. You also described that Colleague A had been upset. The panel considered that this was consistent with Colleague A being upset by what you did. There was no other explanation as to why Colleague A would have been upset when you went to her room. On the other hand, Colleague A's evidence was consistent and reflected the account she gave to Witness 2 during her investigation meeting on 14 November 2023. The panel considered that if Colleague A felt compelled to call her husband after this incident, this was a reasonable and consistent response to an incident occurring in the training room, as Colleague A described. In light of this, the panel determined that it was more likely than not, that Colleague A's account of what had happened in the training room in late December was again reliable.

Colleague A said that there were no further incidents until 9 November 2023:

'I had no future concerns about Mr George's behaviour, and we spoke to each other professionally with no issues until another incident occurred on 9 November 2023.'

9 November 2023 – The Break/Staff Room Incident

The panel noted that different witnesses described a break room or a staff room. The panel was satisfied that all parties were talking about the same room.

The panel had regard to Colleague A's statement, in which she outlined the following incident:

'On 9 November 2023 I was on duty and Mr George was also working [...] I went into the staff room and saw Mr George who was the only person in the room.

When I saw him, I started to leave however Mr George said he would leave. I said, "If you're going out then I'll stay" and he replied, "No, no, no, I'm going out" [...] I held the door open and was standing inside the room and while he was leaving, he came close to me, so close I felt his breath and he tried to hug me and told me that I was looking very beautiful. I pushed him away and Mr George laughed [...] He did not leave the room straight away and kept trying to hug me and I was pushing him away and told him to stop. After about one (1) minute he left the room [...] I felt scared and was shaking and crying [...]'

During her oral evidence, Colleague A said that you had asked her for a kiss and said words to the effect of *'give me a kiss and you can pass'*.

You told the panel that on 9 November 2023, you had ordered a meal from the kitchen which had been left in the break room fridge for you. You stated that you had used the oven in the break room to heat up your meal. You said that you were alone in the break room having your lunch and watching video clips on your phone, which was something you would do when you were alone, when Colleague A came into the break room and sat on the sofa.

Every witness told the panel that the break room was generally busy as it was used by all staff and that conversations in the room were likely to be observed and overhead. The panel agreed but did not consider that this showed that the room was never empty. Both you and Colleague A told the panel that there was nobody else in the room on the occasion that the panel is considering.

You said that as you were leaving, you said something to Colleague A in the Malayalam language which could be translated as *'tell me I'm a king or give me a kiss'*. You stated that in response to this, Colleague A, who was still sat on the sofa,

said words to the effect of 'you're a king, you're a king, now leave'. You denied saying that Colleague A was looking very beautiful or trying to hug her.

The panel heard from witnesses that there is a common Malayalam saying which translates roughly as 'tell me I'm a king or give me a kiss' however, you did not mention this particular saying (namely, reference to a king rather than to a kiss being the price of passage) in your near contemporaneous accounts in your investigation or disciplinary meeting. In your investigatory meeting on 15 November 2023, you stated:

'JG: I was talking to her when she came on her break. I was leaving the staff room [...] I was playful. I said I'm going to kiss you. I was close to her but didn't do anything physically. Just got close to her and as playfully saying it. I was joking around.'

The panel considered that your account during this meeting was incompatible with your oral evidence where you stated that Colleague A was on the sofa. However, it was consistent with Colleague A's evidence in which she stated that you had got close to her. Further, the panel noted that when you were asked about this incident during your disciplinary meeting, you said:

[Ms 1]: In your statement you said "I am going to kiss you". Is this a normal gesture?

JG: It's normal. I was sitting finishing my lunch. I was leaving the staff room. I said to leave give me a kiss first. (Jophil explained in Malayalam what he meant and [Ms 1] translated as asking for a kiss as payment to pass through the door.) [...]

JG: It was a joke. I don't know how she perceived it. Whenever we are friends, say stop there, give me a kiss and I will let you go. Like saying give me £10 and I'll let you in [...]

The panel accepted Colleague A's account. The panel considered Colleague A's account to be consistent and found her to be a credible witness. In light of this, the

panel determined that it was more likely than not, that Colleague A's account of what had happened in the break room on 9 November 2023 was reliable.

Having decided on the balance of probabilities, what happened in December 2022 and November 2023, the panel went on to consider Charges 1-3 and made the following findings:

Charges 1a, 1b, 1d(i) and 1d (ii)

That you, a registered nurse:

1. On or around December 2022:
 - a. hugged Colleague A
 - b. put your hand inside Colleague A's T-shirt
 - c. ...
 - d. whilst in the training room:
 - i. kissed Colleague A
 - ii. grabbed Colleague A's breasts

These charges are found proved.

Charge 1c

That you, a registered nurse:

1. On or around December 2022:
 - c. on more than one occasions asked Colleague A for a kiss

This charge is found NOT proved.

Charge 2

That you, a registered nurse:

2. On 29 December 2022 kissed Colleague A.

This charge is found proved.

Charges 3a, 3b and 3c

That you, a registered nurse:

3. On 9 November 2023:
 - a. told Colleague A that she “was looking very beautiful” or words to that effect
 - b. tried to hug Colleague A
 - c. asked Colleague A for a kiss

These charges are found proved.

Charge 4

4. Your conduct at 1 – 3 inclusive was sexually motivated in that you were seeking sexual gratification.

This charge is found proved with respect to Charges 1a, 1b, 1d(i) and 1d(ii).

In its consideration of this charge, the panel took into account the Sexual Offences Act 2003, Section 78, which defines sexual as:

‘Touching or any other activity is sexual if a reasonable person would consider that:

- a. whatever its circumstances or any person’s purpose in relation to it, it is because of its nature sexual, or*
- b. because of its nature it may be sexual and because of its circumstances or the purpose of any person in relation to it (or both) it is sexual.’*

The panel considered your actions in Charges 1 – 3 separately and made the following findings:

Charges 1a, 1b, 1d(i) and 1d(ii)

The panel considered the definition outlined above and concluded that definition a), applied in this case. The panel concluded that your conduct was sexual in nature and in the absence of any reasonable explanation as to why you would have put your hand inside Colleague A's T-shirt to grope or touch her breasts, your actions in these charges was clearly sexually motivated, in that you were seeking sexual gratification.

Charge 2

The panel considered that your conduct in Charge 2 was not sexually motivated. The panel considered that your conduct, in that you kissed Colleague A, may have been a foolish and inappropriate thing to do, but would not be considered as sexual, therefore your actions were not sexually motivated.

Charges 3a, 3b and 3c

The panel considered that your conduct in Charge 3 was also not sexually motivated. The panel considered that your conduct, in that you asked Colleague A for a kiss, called her beautiful and tried to hug her was again inappropriate and foolish, but was not sexual in nature. The panel heard from Witness 6, who described you as 'immature at times' and you yourself said that you were being 'playful'. On the balance of probabilities, the panel considered that your conduct on 9 November 2023, was not sexually motivated.

In light of the above, the panel found Charge 4 proved with respect to Charges 1a, 1b, 1d(i) and 1d(ii).

Fitness to practise

Having reached its determination on the facts of this case, the panel then moved on to consider, whether the facts found proved amount to misconduct and, if so, whether your fitness to practise is currently impaired. There is no statutory definition of fitness to practise. However, the NMC has defined fitness to practise as a registrant's ability to practise kindly, safely and professionally.

The panel, in reaching its decision, has recognised its statutory duty to protect the public and maintain public confidence in the profession. Further, it bore in mind that there is no burden or standard of proof at this stage, and it has therefore exercised its own professional judgement.

The panel adopted a two-stage process in its consideration. First, the panel must determine whether the facts found proved amount to misconduct. Secondly, only if the facts found proved amount to misconduct, the panel must decide whether, in all the circumstances, your fitness to practise is currently impaired as a result of that misconduct.

Submissions on misconduct

Ms Jones invited the panel to find that the facts found proved amount to misconduct. She submitted that your conduct breached Sections 20, 20.1 and 20.8 of *'The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates'* (2018) (the Code). She stated that whilst breaches of the Code do not automatically result in a finding of misconduct, in this case, your actions fell significantly short of the standards expected of a registered nurse.

Ms Myttas-Perris submitted that you accept that the charges found proved amount to misconduct and that the question of impairment would naturally follow.

Submissions on impairment

Ms Jones then moved on to the issue of impairment and invited the panel to also find that your fitness to practise is currently impaired. She submitted that remediation is an important factor for the panel to consider. She referred to your training certificates and stated that you have undertaken a number of training courses. She submitted that it is one thing to undertake courses, however the panel should consider whether you have actually learnt anything and whether there has been any real change effected or a change in behaviour as a result.

Ms Jones submitted that during your evidence, you considered your actions to have been part of a joke. This would have been the perfect opportunity for you to demonstrate your new and improved way of thinking, after undertaking a training course on professional boundaries.

Ms Jones said that within one of your reflective statements, you stated that the conversation you had with Colleague A was perceived wrongly, which was concerning. She submitted that the panel should consider if this demonstrates meaningful remediation.

Ms Jones submitted that witnesses described your behaviour to be 'jokes' and that you were known to be a 'joker' and 'immature'. She submitted that stating that Colleague A perceived your jokes in a different way was tantamount to you placing the onus on others and not taking accountability for your actions, as there is clear evidence that you were trying to minimise your actions. Therefore, your conduct is attitudinal and is harder to remediate.

Ms Jones submitted that you have not demonstrated any meaningful remorse, and you have demonstrated a failure to foresee how your actions could cause potential harm to others or take appropriate actions to prevent this. She stated that your reflective statement is retrospective and that it was only long after the incidents that you reflected on your actions.

Ms Jones stated that nurses occupy a position of privilege and trust in society and are expected at all times to be professional, whilst carrying out their duties in an

effective, efficient and safe manner. The public are entitled to put their trust in nurses. She submitted that there is a real risk of repetition of the conduct found proved and that a member of the public would be concerned if a finding of misconduct and impairment were not made in a case of this nature.

Ms Myttas-Perris made no specific submissions on the matter of impairment and that this decision is ultimately a matter for the panel. She reminded the panel that the Fitness to Practise process is not designed to punish nurses, but rather to assist nurses, so far as possible, to learn from their mistakes, and that the NMC emphasises the importance of reflection and remorse.

Ms Myttas-Perris referred the panel to your reflective statement and submitted that reflections are retrospective in nature and take place after the fact, not when things are moving in the moment with not much thought. She submitted that you have done all you can, in hindsight, to consider where you might have gone wrong, and that your reflective statement demonstrates someone who is willing to think about where they have gone wrong.

Ms Myttas-Perris stated that the panel has two full reflective statements and training certificates for courses you have completed on Professional Boundaries and Professional Communication, which are at the heart of the allegations. She submitted that you have tried your best to address these concerns and that the panel should keep in mind your good character and the testimonials from colleagues you have worked with for years. She told the panel that you have been described as an exceptional and dependable nurse who consistently prioritises the needs of residents and is committed to patient care, for which you have won an award.

Ms Myttas-Perris submitted that your reflective pieces demonstrate genuine insight and what you have learnt from this experience. She submitted that the incidents occurred over a year to two and a half years ago and, there have been no issues raised about you since then, which is an indicator that you have changed. In light of this, she submitted that the panel may consider that impairment is not necessary on

public protection grounds, as there is no risk to patients or others. She invited the panel to find that your fitness to practise is impaired only on public interest grounds.

The panel accepted the advice of the legal assessor which included reference to a number of relevant judgments. These included: *Council for Healthcare Regulatory Excellence v (1) Nursing and Midwifery Council (2) and Grant* [2011] EWHC 927 (Admin), *Nandi v General Medical Council* [2004] EWHC 2317 (Admin), *Mallon v GMC* [2007] CSIH 17, *General Medical Council v Meadow* [2007] QB 462 (Admin), *Cohen v GMC* [2008] EWHC 581 (Admin), *Professional Standards Authority for Health and Social Care v (1) NMC and (2) Shah* [2025] EWHC 1215 and *Professional Standards Authority for Health and Social Care v (1) NMC and (2) Jalloh* [2023] EWHC 3331.

Decision and reasons on misconduct

The panel considered that your conduct, namely, putting your hand in Colleague A's T-shirt and grabbing her breasts, fell significantly short of the standards expected of a registered nurse. The panel considered that fellow practitioners would find this conduct, which took place in the workplace, with a colleague, in her private accommodation provided by the Home, to be deplorable. In light of this determination, the panel considered that your other actions towards Colleague A whether sexual or not, also fell short of the standards expected of a registered nurse and would also be considered as deplorable by fellow practitioners.

The panel considered the Code and determined that your actions were a clear breach of Section 20 of the Code. The panel appreciated that breaches of the Code do not automatically result in a finding of misconduct. However, it determined that your actions were serious as to amount to misconduct.

Decision and reasons on impairment

The panel next went on to decide if as a result of your misconduct, your fitness to practise is currently impaired.

In coming to its decision, the panel had regard to the NMC Guidance on *'Impairment'* (Reference: DMA-1 Last Updated:28/01/2026) in which the following is stated:

'Being fit to practise is not defined in our legislation but for us it means that a professional on our register can practise as a nurse midwife or nursing associate safely and effectively without restriction.'

Nurses occupy a position of privilege and trust in society and are expected at all times to be professional and to maintain professional boundaries. Patients and their families must be able to trust nurses with their lives and the lives of their loved ones. To justify that trust, nurses must make sure that their conduct at all times justifies both their patients' and the public's trust in the profession.

In this regard the panel considered the judgment of Mrs Justice Cox in the case of *Grant* in reaching its decision. In paragraph 74, she said:

'In determining whether a practitioner's fitness to practise is impaired by reason of misconduct, the relevant panel should generally consider not only whether the practitioner continues to present a risk to members of the public in his or her current role, but also whether the need to uphold proper professional standards and public confidence in the profession would be undermined if a finding of impairment were not made in the particular circumstances.'

The panel considered the three questions asked in the case of *Cohen*. The panel was aware that this is a forward-looking exercise and first considered whether your misconduct was remediable and whether you have remedied your misconduct. It considered your testimonials and training certificates.

The panel considered that your misconduct is difficult to remediate, given the nature of the allegations and the attitudinal nature of your conduct. With respect to whether

you have remedied the concerns, the panel noted that when Colleague A's allegation with respect to the break room incident was raised to you, you were remorseful and later completed several training courses and have provided reflective statements in relation to professional boundaries and communication. During your oral evidence, you further expressed remorse for your actions. However, the panel considered that this was not in relation to your more serious conduct, which it determined to be sexually motivated. In light of this, the panel concluded that your insight, although in the very early stages of developing, was insufficient to demonstrate meaningful remediation of the concerns.

Due to your limited insight, the panel concluded that it is not 'extremely unlikely' that the misconduct will be repeated. The panel therefore decided that a finding of impairment was necessary on the grounds of public protection.

The panel bore in mind that the overarching objective of the NMC is the protection of the public. This involves the pursuit of the following objectives: to protect, promote and maintain the health, safety, and well-being of the public; to promote and maintain public confidence in the professions; and to promote and maintain proper professional standards and conduct for members of those professions.

The panel determined that a finding of impairment on public interest grounds is also required as this case involves an experienced nurse, who has been found to have sexually assaulted a colleague in the workplace. The panel was of the view that a well-informed and reasonable member of the public would be deeply concerned by the circumstances of this case and that public confidence in the nursing profession would be undermined if a finding of impairment was not made. The panel therefore finds your fitness to practise impaired on the grounds of public interest.

Having regard to all of the above, the panel was satisfied that your fitness to practise is currently impaired.

Sanction

The panel has considered this case very carefully and has decided to make a suspension order for a period of six months. The effect of this order is that the NMC register will show that your registration has been suspended.

In reaching this decision, the panel has had regard to all the evidence that has been adduced in this case, including a new bundle and separate statement submitted by you at this stage and had regard to the NMC Guidance on '*The sanctions available*' (Reference: SAN-2 Last Updated: 28/01/2026).

The panel accepted the advice of the legal assessor.

Submissions on sanction

Mr Claydon, on behalf of the NMC, submitted that the appropriate sanction in this case is a striking off order.

Mr Claydon submitted this case concerns serious sexual misconduct towards a colleague and that a clear message needs to be sent that such behaviour will not be tolerated within the nursing profession. He referred the panel to the case of *Bolton v Law Society* [1994] 1 WLR 512, stating that the reputation of the profession is more important than the fortunes of any individual member.

Mr Claydon submitted that the misconduct began within a short period of Colleague A starting work, and that she was new to the country, separated from her family and in a vulnerable position. He submitted that some incidents occurred within her private accommodation. He submitted that the misconduct was repeated over a prolonged period and continued despite clear objections and requests for it to stop.

Mr Claydon submitted that taking no action would be wholly inappropriate given the seriousness of the findings. He stated that a caution order would be insufficient and inappropriate in light of the gravity of the misconduct and the findings on public protection and public interest.

Mr Claydon further submitted that a conditions of practice order would be unworkable and inappropriate as this case concerns serious attitudinal misconduct rather than clinical failings.

Mr Claydon suggested that a suspension order is the only alternative to striking off but submitted that it would not adequately reflect the seriousness of the misconduct.

The panel also bore in mind submissions from Ms Myttas-Perris that the options available to the panel are a suspension order or a striking off order. She stated that, whilst the misconduct is serious, it does not automatically need to result in a strike off.

Ms Myttas-Perris submitted that the panel must begin with the least restrictive sanction necessary to protect the public and the wider public interest. She stated that a suspension order represents the least restrictive sanction capable of meeting those aims in this case.

Ms Myttas-Perris reminded the panel that the findings were made on the balance of probability rather than a higher standard of proof and that you have since accepted the panel's findings and have sought to reframe your position in light of them, demonstrating insight and remorse as best you can in the circumstances. She reminded the panel that you had the right to defend yourself at the fact stage and submitted that this should not be held against you when considering your insight.

Ms Myttas-Perris submitted that you have been subject to conditions of practice for a number of years since the referral and have continued to practise during that time without issue. She submitted that you have taken extensive steps to remediate including undertaking relevant training and have provided multiple reflective accounts.

Ms Myttas-Perris stated that there is evidence before the panel that you have worked safely and professionally in the same role since the events. She referred to the numerous testimonials from people who have worked with you in a professional setting.

Ms Myttas-Perris acknowledged that this is a case of sexual misconduct and that it is serious. However, she submitted that it does not involve patients, cruelty, exploitation, or any criminal conviction.

Ms Myttas-Perris further submitted that proportionality requires the panel to consider the impact of sanctions. She stated that a striking off order would have devastating consequences for you and your family. She accepted that while hardship alone cannot determine sanction, it forms part of the proportionality assessment.

The panel accepted the advice of the legal assessor.

Decision and reasons on sanction

Having found your fitness to practise currently impaired, the panel went on to consider what sanction, if any, it should impose. The panel has borne in mind that any sanction imposed must be appropriate and proportionate and, although not intended to be punitive in its effect, may have such consequences. The decision on sanction is a matter for the panel independently exercising its own judgement.

The panel took into account the following aggravating features:

- abuse of a position of trust
- the vulnerability of Colleague A given her personal circumstances at the time
- your conduct involved unwanted physical sexual conduct
- your conduct involved two separate incidents occurring over the course of a year, and despite rejection by Colleague A
- your conduct presented a potential risk to people receiving care and to colleagues given the impact of maintaining a safe working environment
- limited insight into the impact of your conduct on Colleague A
- breach of professional boundaries

The panel also took into account the following mitigating features:

- your developing insight
- you have continued to practise safely under interim conditions of practice
- you have undertaken some relevant online training
- positive testimonials from colleagues you continue to work with
- reflective accounts
- apologies already made on more than one occasion
- the impact that these proceedings have already had and could continue to have on you personally

The panel noted that this case involved two separate incidents spanning a period of about a year. It also involved unwanted conduct of a sexual nature. The panel considered that sexual misconduct is always serious but considered that the misconduct in this case was not at the upper end of the spectrum of sexual misconduct.

The panel noted that although the evidence you provided at this hearing demonstrated developing insight, your insight still requires further development. In particular, you do not yet appear to have reflected fully on your physical actions towards Colleague A, and your insight into, and accountability for, the impact of your actions on Colleague A is limited.

The panel acknowledged, however, that you have demonstrated some progress in terms of your insight and remediation, although there is more to do. It further acknowledged that you have now practised for some years with no further incident, and that there were positive references from a number of your colleagues and from your line manager, who speak well of your clinical skills and have no concerns about your conduct. The panel further noted that these proceedings, and your concerns about their impact on your family, will inevitably have had a salutary effect on you. The panel considered that it was now relatively unlikely that you would repeat your misconduct, although until you can develop fully developed insight the panel could not say that the risk had been minimalised.

The panel first considered whether to take no action but concluded that this would be inappropriate in view of the seriousness of the case. The panel decided that it would be neither protect the public nor be in the public interest to take no further action.

The panel next considered a caution order and had regard to the NMC Guidance on 'Caution order' (Reference: SAN-2b Last Updated: 28/01/2026) in which the following is stated:

'A caution is only appropriate if the Committee has decided there's no risk to the public or to people using services that requires the professional's practice to be restricted. This means the case is at the lower end of the spectrum of impaired fitness to practise, but the Committee wants to mark that what happened was unacceptable and must not happen again.'

The panel considered that your actions were not at the lower end of the spectrum of impairment, and it found that there is a risk to patient and public safety, albeit a relatively low one. The panel therefore determined that it would neither protect the public nor be in the public interest to impose a caution order.

The panel next considered whether placing conditions of practice on your registration would be appropriate. The panel is mindful that any conditions imposed must be relevant, proportionate, workable and measurable. The panel had regard to the NMC Guidance on 'Conditions of practice order' (Reference: SAN-2c Last Updated: 28/01/2026) and had regard to the following factors:

- *'no evidence of deep-seated personality or attitudinal problems*
- *identifiable areas of the professional's practice in need of assessment and/or retraining*
- ...
- *potential and willingness to respond positively to retraining (this should be based on specific evidence provided by the professional)*
- ...
- *people using services will not be put at risk either directly or indirectly as a result of the conditions*

- *conditions can be created that can be monitored and assessed.'*

The panel is of the view that there are no relevant, proportionate, workable or measurable conditions that could be formulated to protect the public, given the nature of the charges in this case.

Furthermore, the panel concluded that the placing of conditions on your registration would not adequately address the seriousness of this case and would be insufficient to maintain public confidence in the profession nor uphold proper standards.

The panel went on to consider whether a suspension order is appropriate in this case. The panel had regard to the NMC Guidance on '*Suspension order*' (Reference: SAN-2d Last Updated: 28/01/2026) in which the following factors on when a suspension order may be appropriate are set out:

- *'the impairment is very serious but not fundamentally incompatible with continuing to be a registered professional*
- *an outcome less severe than strike-off would still satisfy the over-arching objective.'*

The panel also had regard to the key considerations as set out in the NMC Guidance to weigh up before imposing a suspension order. It noted the following list of circumstances that may make a suspension order an appropriate sanction:

- *'the charges found proved are at the most serious end of the spectrum and call into question the professional's suitability to continue practising, either currently or at all*
- *while it is possible that the professional could be fit to practise in future, only a period out of practice would be sufficient to allow them to fully strengthen their practice through reflection, the development of their professional skills and / or development of insight and remediation*
- *there is a risk to the safety of people using services if the professional were allowed to continue to practise even with conditions*

- *what went wrong is so serious that public confidence in the profession and professional standards could not be maintained if the professional were able to continue practising without stopping for a period of time*
- *despite the seriousness of what happened, the professional has engaged in the proceedings and has shown at least some meaningful insight which evidences a realistic possibility that they will continue to develop this insight, address their concerns and return to practice.'*

The panel carefully balanced all the factors and determined that although the misconduct was serious and required a significant regulatory response, it was not fundamentally incompatible with you remaining on the register. The panel determined that a period of suspension would be sufficient to mark the gravity of your misconduct and provide a meaningful opportunity for further reflection and development, whilst recognising that the risk of repetition is relatively unlikely and that there remains a prospect of safe return to practice.

The panel went on to consider whether a striking-off order was necessary but, taking account of all the information before it, and of the mitigation provided, the panel concluded that it would be disproportionate. Whilst the panel acknowledges that a suspension order may have a punitive effect, it would be unduly punitive in your case to impose a striking-off order.

Balancing all of these factors the panel has concluded that a suspension order would be the appropriate and proportionate sanction.

The panel noted the hardship such an order will inevitably cause you. However, this is outweighed by the public interest considerations in this case.

The panel considered that this order is necessary to mark the seriousness of this case, in order to maintain public confidence in the profession, and to send to the public and the profession a clear message about the standard of behaviour required of a registered nurse.

The panel determined that a suspension order for a period of six months was appropriate in this case to mark the seriousness of the misconduct. This should provide sufficient time for you to undertake the required further development of your insight. The panel further considered that any lesser period would be insufficient to mark your misconduct.

At the end of the period of suspension, another panel will review the order. At the review hearing the panel may revoke the order, or it may confirm the order, or it may replace the order with another order.

Any future panel reviewing this case would be assisted by:

- A reflective piece demonstrating a clear understanding of the seriousness of the misconduct, including the physical sexual contact;
- Evidence of developed insight into professional boundaries and the impact of your inappropriate behaviour on Colleague A;
- Evidence that you continue to maintain and update your professional knowledge including but not limited to training, reading, research, or other relevant professional development;
- Testimonials or references from any employer, voluntary organisation, or other professional setting in which you have been engaged during the period of suspension, addressing your conduct, professionalism, and adherence to appropriate boundaries.

This will be confirmed to you in writing.

Interim order

As the suspension order cannot take effect until the end of the 28-day appeal period, the panel has considered whether an interim order is required in the specific circumstances of this case. It may only make an interim order if it is satisfied that it is necessary for the protection of the public, is otherwise in the public interest or in your own interests until the suspension sanction takes effect.

The panel heard and accepted the advice of the legal assessor.

Submissions on interim order

The panel took account of the submissions made by Mr Claydon. He submitted that an interim suspension order for a period of 18 months was required on the grounds of public protection and public interest. He sought that order on the basis that it gives sufficient time for any appeal that may be lodged to be heard.

The panel also took into account the submissions of Ms Myttas-Perris. She submitted that she would defer to the legal assessor. She submitted that a period of 18 months appears excessive and overly cautious, particularly given that the substantive suspension order is for six months. Ms Myttas-Perris submitted that there is no need for an interim order in this case given the panel's decision on sanction. She submitted that if the panel was minded to impose an order the current interim conditions of practice order would suffice.

The panel accepted the advice of the legal assessor.

Decision and reasons on interim order

The panel was satisfied that an interim order is necessary for the protection of the public and is otherwise in the public interest. The panel had regard to the seriousness of the facts found proved and the reasons set out in its decision for the substantive order in reaching the decision to impose an interim order. Whilst the panel had found that it was relatively unlikely that these matters would be repeated, it had nevertheless found that there was at this stage some ongoing risk, and any risk would be associated with the potential for significant harm. Although you have been working without incident under interim conditions of practice, the panel noted that, if an appeal is brought, the interim order may be in place for a significant period of time. Moreover, the fact that the panel had now made findings increased the public interest in your practice being appropriately restricted.

In light of the gravity of its findings on facts and impairment, the panel concluded that an interim order is necessary for the protection of the public and is otherwise in the public interest.

The panel considered whether interim conditions of practice would be sufficient in this case. The panel was satisfied that no workable and appropriate conditions could be formulated to address the concerns, reflect the seriousness or maintain public confidence in the profession in this case. It concluded that an interim conditions of practice order would not be appropriate or proportionate in this case, due to the reasons already identified in the panel's determination for imposing the substantive order.

The panel therefore determined to impose an interim suspension order for a period of 18 months in order to protect the public and otherwise in the public interest, during any potential appeal period. The panel was mindful that any appeal would be likely to take a protracted period to be dealt with in the civil justice system and this is outside the NMC's control. The panel determined that not to impose an interim order would be inconsistent with its earlier decision to suspend you.

If no appeal is made, then the interim suspension order will be replaced by the substantive suspension order 28 days after you are sent the decision of this hearing in writing.

That concludes this determination.